

## Accountable Communities of Health: Designation and Development Activities and Outputs (5.15.2015)

### Background

- We are focusing on the ACH activities to be carried out in 2015-2016. These include activities and outputs required for ACH designation (**bold blue text** in the table), as well as activities beyond the designation criteria for ACHs to initiate (*italic purple text* in the table), such as setting up a regional health needs assessment and planning process (but not completing it), beginning to work in areas of delivery system reform, and a roadmap for the development of a plan for sustainability.
- The evaluation measures for 2015-2016 are largely based on deliverables and corresponding outputs, e.g., creating governance documents/plans, and participating in planning processes at the local, regional and state levels. While the deliverables set the stage for future health improvement activities, over time the state will consider more outcome based measures. Examples of future activities/deliverables are included in the 2016-2018 column. Please note that ACHs will always have deliverables/outputs to reflect specific activities of work. There is a distinction between deliverables/outputs and measures for regional health outcomes.
- While we anticipate the funding amount to be the same for each region, we recognize that some areas will require more or less time so there is a window of 6 to 12 months from the Date of Execution (DOE), and the DOE is based on demonstration of ACH readiness, not a pre-determined award date.
- As for designation criteria, we are looking for demonstration of development and progress, in alignment with contract deliverables. It is important to note that this does not mean contract deliverables must be complete by the intended date of designation. The existing Design contracts could run parallel to ACH designation as long as the minimum requirements are met, demonstrating readiness to take on the additional (but aligned) activities. This will be outlined in more detail within the Readiness proposal framework (May 15), but examples are identified within the matrix below.

### Assumptions

- All proposals within this framework are contingent upon CMMI approval.
- CMMI will allow for carry-over of funds to complete deliverables that are not finished by January 31. This allows “rolling designation” and aligns with our principle of the right funding at the right time for the right reason, as opposed to a manufactured timeline.
- A general health improvement activities category is included in the Phase 1 scope of work to provide flexibility for sub-awardees to work on activities beyond those required as part of Phase 1.
- Regional collaboration is not a deliverable but is an expectation as regions continue to partner with each other and the state, including access to technical assistance resources and shared learning.

**ACH Designation Criteria** (outputs specified in table below, see **bold blue text**)

- Demonstration of operational governance structure, interim or otherwise, including plan for testing/adjustment.
- Governing body membership reflects balanced, multi-sector engagement. At a minimum, balanced engagement refers to the participation of key community partners that represent systems that influence health; public health, the health care system, and systems that influence the SDOH, with the recognition that this includes different spheres of influence. The governance model should also include a process for modifying as the environment changes.
- Community engagement activities are underway and additional community engagement activities are planned in addition to engagement that occurs through the governance structure (e.g., ACH governing body and committee meetings).
- Established backbone functions to perform financial and administrative functions. These functions can be performed by one or more organizations, interim or otherwise, and must demonstrate accountability to the ACH. Includes a process for ongoing evaluation and confirmation of the backbone organization(s).
- Initial priority areas (service gaps and/or health priorities) and strengths identified as part of ongoing regional needs inventory and assessment development. Initial regional health improvement project(s) or plan identified. Plan in place to continue this development in alignment with forthcoming ACH technical assistance opportunities (i.e., framework for regional initiatives inventory and priority identification).
- Initial operating budget established. Initial sustainability planning strategy documented and includes, but is not limited to, initial considerations for enhancing revenue base. This strategy could include a summary that outlines early efforts to consider Federal, State, local and private philanthropic resources to sustain the ACH.

Each of the above requirements should include potential next steps or opportunities as they relate to the forthcoming ACH technical assistance. The frameworks and guidance that will be provided via technical assistance for the above deliverables will support ongoing efforts, whether to assist with completion of the minimum requirements outlined above or the ongoing efforts that extent beyond these milestones.

## ACH Activities and Outputs

Area	<u>ACTIVITIES</u> Pre-ACH activities (to achieve designation) <i>Additional activities for 2015-2016            (beyond designation)</i>	<u>OUTPUTS &amp; PROCESS MEASURES</u>	<u>Examples of Potential Activities            &amp; Outputs for 2016-2018</u>
<b>Governance &amp; Structure</b>	<ul style="list-style-type: none"> <li>Refining governance, decision making, &amp; engagement, including backbone functions, that reflect multi-sector participation with systems that influence health; public health; the health care system; and systems that influence the SDOH</li> <li>Sustainability planning, including resource/partner engagement and coordination with state/TA, for <u>initial</u> priorities to develop a long-term sustainability plan post-grant</li> <li><i>Developing a structure for funding pass-through and corresponding financial accountability within the ACH</i></li> <li><i>Developing a communication plan</i></li> </ul>	<ul style="list-style-type: none"> <li><b>Bylaws or charter(s) written that address governance, engagement strategies, membership, roles, and responsibilities</b></li> <li><b>Decision making plan developed and approved by governing or advisory board(s), including conflict resolution strategy</b></li> <li><b>Conflict of interest disclosure created or decision documented addressing the ACH's policy on COI</b></li> <li><b>Process established to adjust ACH structure as issues/gaps emerge over time</b></li> <li><b>Framework for sustainability planning developed, including considerations around financial and social capital</b></li> <li><i>Financial, human resources and accounting structure established</i></li> <li><i>Communication plan established</i></li> </ul>	<ul style="list-style-type: none"> <li>Further refinement of governance structure, membership, roles and responsibilities</li> <li>Sustainability and communication plans implemented</li> </ul>

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<b>Health Improvement &amp; Measurement</b>	<ul style="list-style-type: none"> <li>• Begin conducting a regional health needs inventory to identify initial regional strengths and gaps (i.e., health status, services and programs that contribute to health or social determinants of health) and create a plan to develop a Regional Health Improvement Plan (RHIP)</li> <li>• <i>Formalizing a RHIP, in partnership with LHJs and other partners, and leveraging available data</i></li> <li>• <i>Coordinating across membership and with state AIM and other related programs to inform regional analytic (e.g., dashboard) needs</i></li> <li>• <i>Participating in development of common measure set for ACH's with State and regional partners, leveraging existing statutorily required measures and qualitative measures</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Draft or final health inventory developed and include priority areas (service/resource gaps and/or health/SDOH issues) and strengths (health/SDOH, services and/or resources).</b></li> <li>• <b>Work plan in place to develop a RHIP (including potential support from ACH TA team) with goals, deliverables, a timeline, and roles and responsibilities</b></li> <li>• <i>Draft plan for how to work across membership and AIM/state to create regional dashboard and data reporting system</i></li> <li>• <i>Initial systems for collecting measures identified</i></li> </ul>	<ul style="list-style-type: none"> <li>• Comprehensive regional health needs assessment</li> <li>• RHIP created, with concrete action plan and measureable objectives</li> <li>• Regional dashboard leveraged to drive decision making</li> <li>• Common measures developed and reported on regularly</li> </ul>
<b>Delivery System Transformation</b>	<ul style="list-style-type: none"> <li>• <i>Identifying health/SDOH improvement projects and developing a coordinated plan (in alignment with regional and state priorities), including exploration of ACH role in regional work</i></li> <li>• <i>Engaging regional partners and the state on purchasing and delivery system improvements</i></li> <li>• <i>Participate in development of regional linkages to Practice Transformation Hub</i></li> <li>• <i>Participate in ACH development planning and health improvement activities</i></li> <li>• <i>Support and activate members to collectively address state measures.</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Created draft plan for health/SDOH improvement project(s), including the ACH's role</i></li> <li>• <i>Actively advising on purchasing and delivery system transformation efforts as they emerge, including responding to requests for feedback</i></li> <li>• <i>Participation in Practice Transformation Hub development and activities</i></li> <li>• <i>Activation across membership to collectively inform and respond to state measures.</i></li> </ul>	<ul style="list-style-type: none"> <li>• Health improvement projects completed</li> <li>• Role in health system transformation and cultivation, including linkage to practice transformation hub</li> <li>• Advising on purchasing and delivery system improvements</li> </ul>